

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

10/02/2008 18 : 52

National Rifle Association of America Political Victory Fund

11250 Waples Mill Road

Fairfax

VA

22030

FEC ID No. C00053553☐ 24-Hour Notice ☒ 48-Hour Notice**SCHEDULE E (FEC Form 3X)****ITEMIZED INDEPENDENT EXPENDITURES**

PAGE OF 1 / 16

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund**FEC IDENTIFICATION NUMBER****C** C00053553Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Edmonds Associates, Inc.

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1261.00

Mailing Address

8221 Old Courthouse Road, Suite 2

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Magazine Ad

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____**Transaction ID: 26549209**

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Edmonds Associates, Inc.

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

216.67

Mailing Address

8221 Old Courthouse Road, Suite 2

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Magazine Ad Production Cost

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____**Transaction ID: 26549211**

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

1477.67

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Edmonds Associates, Inc.

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

3786.00

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Magazine Ad

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549213

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Edmonds Associates, Inc.

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

450.00

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Magazine Ad Production Cost

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549216

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

4236.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

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SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Edmonds Associates, Inc.

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

3426.00

Mailing Address

8221 Old Courthouse Road, Suite 2

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Magazine Ad

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549218

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Edmonds Associates, Inc.

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

450.00

Mailing Address

8221 Old Courthouse Road, Suite 2

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Magazine Ad Production Cost

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549220

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

3876.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

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SCHEDULE E (FEC Form 3X)

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Edmonds Associates, Inc.

Date

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 8

Amount

29356.00

Mailing Address

8221 Old Courthouse Road, Suite 2

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Magazine Ad

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549228

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Edmonds Associates, Inc.

Date

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 8

Amount

225.00

Mailing Address

8221 Old Courthouse Road, Suite 2

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Magazine Ad Production Cost

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549230

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

29581.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :**FEC ID No.**☐ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)****ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund**FEC IDENTIFICATION NUMBER****C** C00053553Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Edmonds Associates, Inc.

Date

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 8

Amount

225.00

Mailing Address

8221 Old Courthouse Road, Suite 2

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Magazine Ad Production Cost

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____**Transaction ID:** 26549234

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Edmonds Associates, Inc.

Date

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 8

Amount

8709.00

Mailing Address

8221 Old Courthouse Road, Suite 2

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Magazine Ad

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____**Transaction ID:** 26549232

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

8934.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

12289.84

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549183

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1899.62

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: FL

☐ Senate

District: 24

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549184

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

14189.46

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1040.20

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: OH

☐ Senate

District: 01

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549185

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

638.05

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: NM

☐ Senate

District: 02

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549187

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

1678.25

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 8 / 16

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

638.05

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: NM

☐ Senate

District: 02

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549188

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

842.76

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: CO

☐ Senate

District: 04

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549190

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

1480.81

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

842.76

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☐ House

State: CO

☒ Senate

District: _____

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549191

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1223.60

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: IL

☐ Senate

District: 06

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549192

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

2066.36

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

688.01

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☐ House

State: NC

☒ Senate

District: _____

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Elizabeth Dole

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549193

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

688.01

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: NC

☐ Senate

District: 08

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Rep. Robin C. Hayes

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549194

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

1376.02

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

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SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 11 / 16

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1274.47

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: CA

☐ Senate

District: 11

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549196

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1285.08

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: NH

☐ Senate

District: 01

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549197

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

2559.55

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 12 / 16

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1265.25

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: NV

☐ Senate

District: 03

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549198

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1848.17

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: MO

☐ Senate

District: 06

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549199

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

3113.42

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 13 / 16

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1274.47

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: AZ

☐ Senate

District: 01

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549200

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

5399.71

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☐ Support☒ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549202

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

6674.18

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 14 / 16

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1604.92

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: MI

☐ Senate

District: 09

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549203

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Amount

1504.56

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: NY

☐ Senate

District: 29

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: 26549204

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

3109.48

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 15 / 16
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input checked="" type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 1003.03	
City Fairfax	State VA	Zip Code 22030	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential
Purpose of Expenditure Prepay Salary / Benefits	Category/ Type	001	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: 26549205
Full Name (Last, First, Middle, Initial) of Payee Meridian Resources, LLC			Date M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 8
Mailing Address P.O. Box 1671			Amount 2000.00
City Boise	State ID	Zip Code 83701	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Purpose of Expenditure Consulting Fees	Category/ Type	003	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: 26540307

(a) SUBTOTAL of Itemized Independent Expenditures	3003.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mary Rose Adkins Signature	M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 16 / 16

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Meridian Resources, LLC

Date

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 8

Mailing Address

P.O. Box 1671

Amount

2000.00

City

Boise

State

ID

Zip Code

83701

Purpose of Expenditure

Consulting Fees

Category/
Type

003

Office Sought:

☒ House

State: ID

☐ Senate

District: 01

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Mr. William Sali

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Calendar Year-To-Date Per Election

0.00

for Office Sought

Transaction ID: 26540308

(a) SUBTOTAL of Itemized Independent Expenditures

2000.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

89355.23

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8